

**H.R. 2580**  
**AMENDMENT TO AMENDMENT IN THE NATURE OF**  
**A SUBSTITUTE**  
**OFFERED BY \_\_\_\_\_**

Page 111, after line 22, insert the following new title and make the necessary conforming amendments:

1       **TITLE IV—PUBLIC HEALTH**

2       **SEC. 401. PUBLIC HEALTH AUTHORITIES.**

3       (a) DISEASE REGISTRY AND MEDICAL CARE PRO-  
4 VIDERS.—Section 104(i)(1) (42 U.S.C. 9604(i)(1)) is  
5 amended—

6           (1) by striking subparagraph (A) and inserting  
7 the following:

8           “(A) in cooperation with the States, for sci-  
9 entific purposes and public health purposes, estab-  
10 lish and maintain a national registry of persons ex-  
11 posed to toxic substances;” and

12          (2) by striking the last sentence and inserting  
13 the following:

14          “In cases of public health emergencies, exposed per-  
15 sons shall be eligible for referral to licensed or ac-  
16 credited health care providers.”.

17       (b) SUBSTANCE PROFILES.—Section 104(i)(3) (42  
18 U.S.C. 9604(i)(3)) is amended—

1 (1) by inserting “(A)” after “(3)”;

2 (2) by redesignating subparagraphs (A), (B),  
3 and (C) as clauses (i), (ii), and (iii), respectively;  
4 and

5 (3) by striking “Any toxicological profile or re-  
6 vision thereof” and all that follows through “par-  
7 ties.” and inserting the following:

8 “(B) Any toxicological profile or revision thereof shall  
9 reflect the Administrator of ATSDR’s assessment of all  
10 relevant toxicological testing which has been peer re-  
11 viewed. The profiles prepared under this paragraph shall  
12 be for those substances highest on the list of priorities  
13 under paragraph (2) for which profiles have not previously  
14 been prepared or for substances not on the list but which  
15 have been found at facilities for which there has been a  
16 response action under this Act and which have been deter-  
17 mined by ATSDR to be of health concern. Profiles re-  
18 quired under this paragraph shall be revised and repub-  
19 lished, as appropriate, based on scientific development and  
20 shall be provided to the States, including State health de-  
21 partments, tribal health officials, and local health depart-  
22 ments, and made available to other interested parties.”.

23 (c) DETERMINING HEALTH EFFECTS.—Section  
24 104(i)(5)(A) (42 U.S.C. 9604(i)(5)(A)) is amended—

1           (1) by striking “designed to determine the  
2           health effects (and techniques for development of  
3           methods to determine such health effects) of such  
4           substance.” and inserting “conducted directly or by  
5           means such as cooperative agreements and grants  
6           with appropriate public and nonprofit institutions.  
7           The research shall be designed to determine the  
8           health effects of the substance and techniques for  
9           development of methods to determine such health ef-  
10          fects.”;

11           (2) by redesignating clause (iv) as clause (v);

12           (3) by striking “and” at the end of clause (iii);

13          and

14           (4) by inserting after clause (iii) the following:

15           “(iv) laboratory and other studies to develop in-  
16           novative techniques for predicting organ-specific,  
17           site-specific, and system-specific acute and chronic  
18           toxicity; and”.

19          (d) PUBLIC HEALTH AT NPL FACILITIES.—

20           (1) PRELIMINARY PUBLIC HEALTH ASSESS-  
21           MENTS.—Section 104(i)(6) (42 U.S.C. 9604(i)(6)) is  
22           amended by striking “(6)(A)” and all that follows  
23           through the period at the end of subparagraph (A)  
24           and inserting the following:

1       “(6)(A)(i) The Administrator of ATSDR shall per-  
2 form a preliminary public health assessment or health con-  
3 sultation for each facility on the National Priorities List,  
4 including those facilities owned by any department, agen-  
5 cy, or instrumentality of the United States, and those sites  
6 that are the subject of a petition under subparagraph (B).  
7 The preliminary public health assessment or health con-  
8 sultation shall be commenced as soon as practicable after  
9 each facility is proposed for inclusion on the National Pri-  
10 orities List or the Administrator of ATSDR accepts a peti-  
11 tion for a public health assessment. If the Administrator  
12 of ATSDR, in consultation with local public health offi-  
13 cials, determines that the results of a preliminary public  
14 health assessment or health consultation indicate the need  
15 for a public health assessment, the Administrator of the  
16 ATSDR shall conduct the public health assessment of  
17 those sites posing a health hazard. The results of the pub-  
18 lic health assessment should be considered in selecting the  
19 remedial action for the facility.

20       “(ii) The Administrator of ATSDR, in cooperation  
21 with States, shall design public health assessments that  
22 take into account the needs and conditions of the affected  
23 community.

24       “(iii) The Administrator of EPA shall place highest  
25 priority on facilities with releases of hazardous substances

1 which result in actual ongoing human exposures at levels  
2 of public health concern or adverse health effects as identi-  
3 fied in a public health assessment conducted by the Ad-  
4 ministrator of ATSDR or are reasonably anticipated based  
5 on currently known facts.”.

6 (2) STRATEGIES FOR OBTAINING DATA; COMMU-  
7 NITY INVOLVEMENT.—Section 104(i)(6)(D) (42  
8 U.S.C. 9604(i)(6)(D)) is amended—

9 (A) by inserting “(i)” after “(D)”; and

10 (B) by adding at the end the following:

11 “(ii) The President and the Administrator of ATSDR  
12 shall develop strategies to obtain relevant on-site and off-  
13 site characterization data for use in the public health as-  
14 sessment. The President shall, to the maximum extent  
15 practicable, provide the Administrator of ATSDR with the  
16 data and information necessary to make public health as-  
17 sessments sufficiently prior to the choice of remedial ac-  
18 tions to allow the Administrator of ATSDR to complete  
19 these assessments.

20 “(iii) Where appropriate, the Administrator of  
21 ATSDR shall provide to the President as soon as prac-  
22 ticable after site discovery, recommendations for sampling  
23 environmental media for hazardous substances of public  
24 health concern. To the extent feasible, the President shall

1 incorporate such recommendations into the President's  
2 site investigation activities.

3 “(iv) In order to improve community involvement in  
4 public health assessments, the Administrator of ATSDR  
5 shall carry out each of the following duties:

6 “(I) Collect from community advisory groups,  
7 from State and local public health authorities, and  
8 from other sources in communities affected or poten-  
9 tially affected by releases of hazardous substances  
10 data regarding exposure, relevant human activities,  
11 and other factors.

12 “(II) Design public health assessments that  
13 take into account the needs and conditions of the af-  
14 fected community. Community-based research mod-  
15 els, local expertise, and local health resources should  
16 be used in designing the public health assessment.  
17 In developing such designs, emphasis shall be placed  
18 on collection of actual exposure data, and sources of  
19 multiple exposure shall be considered.”.

20 (3) CONFORMING AMENDMENTS.—Section  
21 104(i) (42 U.S.C. 9604(i)) is amended by inserting  
22 “public” before “health assessment” each place it  
23 appears and before “health assessments” each place  
24 it appears.

1 (e) HEALTH STUDIES.—Section 104(i)(7) (42 U.S.C.  
2 9604(i)(7)) is amended by striking “(7)(A)” and all that  
3 follows through the period at the end of subparagraph (A)  
4 and inserting the following:

5 “(7)(A) Whenever in the judgment of the Adminis-  
6 trator of ATSDR it is appropriate on the basis of the re-  
7 sults of a public health assessment or on the basis of other  
8 appropriate information, the Administrator of ATSDR  
9 shall conduct a human health study of exposure or other  
10 health effects for selected groups or individuals in order  
11 to determine the desirability of conducting full scale epi-  
12 demiologic or other health studies of the entire exposed  
13 population.”.

14 (f) DISTRIBUTION OF MATERIALS TO HEALTH PRO-  
15 FESSIONALS AND MEDICAL CENTERS.—Section  
16 104(i)(14) (42 U.S.C. 9604(i)(14)) is amended to read as  
17 follows:

18 “(14) EDUCATIONAL MATERIALS.—In imple-  
19 menting this subsection and other health-related  
20 provisions of this Act the Administrator of ATSDR,  
21 in cooperation with the States, shall—

22 “(A) assemble, develop as necessary, and  
23 distribute to the State and local health officials,  
24 tribes, medical colleges, physicians, nursing in-  
25 stitutions, nurses, and other health profes-

1           sionals and medical centers appropriate edu-  
2           cational materials (including short courses) on  
3           the medical surveillance, screening, and meth-  
4           ods of prevention, diagnosis, and treatment of  
5           injury or disease related to exposure to haz-  
6           ardous substances (giving priority to those list-  
7           ed under paragraph (2)) through means the  
8           Administrator of ATSDR considers appropriate;  
9           and

10                 “(B) assemble, develop as necessary, and  
11           distribute to the general public and to at-risk  
12           populations appropriate educational materials  
13           and other information on human health effects  
14           of hazardous substances.”.

15           (g) GRANTS, CONTRACTS, AND COMMUNITY ASSIST-  
16   ANCE   ACTIVITIES.—Section 104(i)(15) (42 U.S.C.  
17   9604(i)(15)) is amended—

18                 (1) by striking “(15)” and inserting the fol-  
19   lowing:

20                 “(15) GRANTS, CONTRACTS, AND COMMUNITY  
21   ASSISTANCE.—(A)”;

22                 (2) in the first sentence by striking “coopera-  
23   tive agreements with States (or political subdivisions  
24   thereof)” and inserting “grants, cooperative agree-  
25   ments, or contracts with States (or political subdivi-



1       sions thereof), other appropriate public authorities,  
2       public or private institutions, colleges, universities,  
3       and professional associations”;

4           (3) by aligning the text of subparagraph (A) (as  
5       designated by paragraph (1) of this subsection) ac-  
6       cordingly; and

7           (4) by adding at the end the following:

8           “(B) When a public health assessment is con-  
9       ducted at a facility on the National Priorities List,  
10      or a facility is being evaluated for inclusion on the  
11      National Priorities List, the Administrator of  
12      ATSDR may provide the assistance specified in this  
13      paragraph to public or private nonprofit entities, in-  
14      dividuals, and community-based groups that may be  
15      affected by the release or threatened release of haz-  
16      ardous substances in the environment.

17          “(C) The Administrator of ATSDR, pursuant  
18      to the grants, cooperative agreements, and contracts  
19      referred to in this paragraph, is authorized and di-  
20      rected to provide, where appropriate, diagnostic serv-  
21      ices, health data registries and preventative public  
22      health education to communities affected by the re-  
23      lease of hazardous substances.”.

1 (h) PEER REVIEW COMMITTEE.—Section 104(i) (42  
2 U.S.C. 9604(i)) is amended by adding at the end the fol-  
3 lowing:

4 “(19) PEER REVIEW COMMITTEE.—The Admin-  
5 istrator of ATSDR shall establish an external peer  
6 review committee of qualified health scientists who  
7 serve for fixed periods and meet periodically to—

8 “(A) provide guidance on initiation of  
9 studies;

10 “(B) assess the quality of study reports  
11 funded by the agency; and

12 “(C) provide guidance on effective and ob-  
13 jective risk characterization and communica-  
14 tion.

15 The peer review committee may include additional  
16 specific experts representing a balanced group of  
17 stakeholders on an ad hoc basis for specific issues.  
18 Meetings of the committee should be open to the  
19 public.”.

20 (i) CONFORMING AMENDMENTS.—Section 104(i) is  
21 further amended—

22 (1) in paragraph (16) by inserting “PER-  
23 SONNEL.—” after “(16)”;

24 (2) in paragraph (17) by inserting “AUTHORI-  
25 TIES.—” after “(17)”;

1           (3) in paragraph (18) by inserting “POLLUT-  
2           ANTS AND CONTAMINANTS.—” after “(18)”; and

3           (4) by moving paragraphs (16), (17), and (18)  
4           2 ems to the right.

5   **SEC. 402. INDIAN HEALTH PROVISIONS.**

6           Section 104(i) (42 U.S.C. 9604(i)) is further  
7           amended—

8           (1) in paragraph (1) by inserting “the Director  
9           of the Indian Health Service,” after “the Secretary  
10          of Transportation,”;

11          (2) in paragraph (5)(A) by inserting “and the  
12          Director of the Indian Health Service” after “EPA”;

13          (3) in paragraph (6)(C) by inserting “where low  
14          population density is not used as an excluding risk  
15          factor” after “health appears highest”;

16          (4) by adding at the end of paragraph (6)(E)  
17          the following: “If the Administrator of ATSDR or  
18          the Administrator of EPA does not act on the rec-  
19          ommendations of the State, the Administrator of  
20          ATSDR or EPA must respond in writing to the  
21          State or tribe as to why the Administrator of  
22          ATSDR or EPA has not acted on the recommenda-  
23          tions.”;

24          (5) in paragraph (6)(F)—

1 (A) by striking “and” after “emissions,”;  
2 and

3 (B) by inserting “, and any other pathways  
4 resulting from subsistence activities” after  
5 “food chain contamination”; and

6 (6) by striking the period at the end of para-  
7 graph (6)(G) and inserting the following: “, and may  
8 give special consideration, where appropriate, to any  
9 practices of the affected community that may result  
10 in increased exposure to hazardous substances, pol-  
11 lutants, or contaminants, such as subsistence hunt-  
12 ing, fishing, and gathering.”.

13 **SEC. 403. HAZARD RANKING SYSTEM.**

14 Section 105(c) (42 U.S.C. 9605(c)) is amended by  
15 adding at the end the following:

16 “(5) RISK PRIORITIZATION.—In setting prior-  
17 ities under subsection (a)(8), the President shall  
18 place highest priority on facilities with releases of  
19 hazardous substances which result in actual ongoing  
20 human exposures at levels of public health concern  
21 or demonstrated adverse health effects as identified  
22 in a public health assessment conducted by the  
23 Agency for Toxic Substances and Disease Registry  
24 or are reasonably anticipated based on currently  
25 known facts.

1           “(6) PRIOR RESPONSE ACTION.—Any evalua-  
2           tion under this section shall take into account all  
3           prior response actions taken at a facility.”.

4   **SEC. 404. DISCLOSURE OF RELEASES OF HAZARDOUS SUB-**  
5           **STANCES AT SUPERFUND SITES.**

6           Section 117 (42 U.S.C. 9617) is amended—

7           (1) in the section heading by inserting “**AND**  
8           **DISCLOSURE**” after “**PUBLIC PARTICIPATION**”;  
9           and

10          (2) by adding at the end the following new sub-  
11          section:

12          “(f) DISCLOSURE OF RELEASES OF HAZARDOUS  
13          SUBSTANCES AT SUPERFUND SITES.—

14               “(1) INFORMATION.—The President shall make  
15               the following information available to the public as  
16               provided in paragraph (2) about releases of haz-  
17               ardous substances, pollutants, and contaminants  
18               from facilities that have been listed or proposed for  
19               listing on the National Priorities List at the fol-  
20               lowing stages of a response action:

21                   “(A) REMOVAL ACTIONS.—A best estimate  
22                   of the releases from the facility before the re-  
23                   moval action is taken, during the period of the  
24                   removal action, and that are expected after the  
25                   removal action is completed.

1           “(B) REMEDIAL INVESTIGATION.—As part  
2           of the requirements for the remedial investiga-  
3           tion, a summary and best estimate of the re-  
4           leases from the facility.

5           “(C) FEASIBILITY STUDY.—As part of the  
6           feasibility study, a summary and best estimate  
7           of the releases that are expected both during  
8           and at the conclusion of each remedial option  
9           that is considered.

10          “(D) RECORD OF DECISION.—As part of  
11          the record of decision, a summary and best esti-  
12          mate of the releases that are expected both dur-  
13          ing and at the conclusion of implementation of  
14          the selected remedy.

15          “(E) CONSTRUCTION COMPLETION.—After  
16          construction of the remedy is complete and dur-  
17          ing operation and maintenance, a best estimate  
18          of the releases from the facility.

19          “(2) AVAILABILITY OF INFORMATION.—Infor-  
20          mation provided under this subsection shall be made  
21          available to the residents of the communities sur-  
22          rounding the covered facility, to police, fire, and  
23          emergency medical personnel in the surrounding  
24          communities, and to the general public. To improve  
25          access to such information by Federal, State, and

1 local governments and researchers, such information  
2 may be provided to the general public through elec-  
3 tronic or other means. Such information shall be ex-  
4 pressed in common units and a common format.

5 “(3) SOURCE OF INFORMATION AND METHODS  
6 OF COLLECTION.—Nothing in this subsection shall  
7 require the collection of any additional data beyond  
8 that already collected as part of the response action.  
9 If data are not readily available, the information  
10 provided under this subsection shall be based on best  
11 estimates.”.

Page 21, after line 25, insert:

12 (9) By adding the following new subsections at  
13 the end thereof:

14 “(h) SENSITIVE SUBPOPULATIONS AND SITE-SPE-  
15 CIFIC RISK ASSESSMENT.—The President shall use site-  
16 specific risk assessment that meets the requirements of  
17 the principles set forth in subsection (g) to—

18 “(1) determine the nature and extent of risk to  
19 human health and the environment;

20 “(2) identify groups which are currently or  
21 would be highly exposed or highly susceptible (A) to  
22 contamination from the site based on current and  
23 reasonably anticipated uses of land, water, and other

1 resources at or around the site, or (B) to risks arising from implementation of a remedial option;

2 “(3) assist in establishing remedial objectives  
3 for the facility respecting releases or threatened releases, and in identifying geographic areas or exposure pathways of concern; and

4 “(4) evaluate alternative remedial actions for  
5 the facility to determine their risk reduction benefits  
6 and assist in selecting the remedial action for the facility that meets the criteria of paragraph (1) of subsection (b).

7 “(i) STUDY OF SUBSTANCES AND MIXTURES.—(1)  
8 The President shall conduct a study of the cancer potency  
9 values of 12 hazardous substances listed under paragraph  
10 (2) of section 104(i) that are frequently found to pose significant risks at National Priorities List facilities. The  
11 study may also include a review of other health effects values. The President shall not include a substance in the  
12 study under this subsection if such substance is under scientific reevaluation pursuant to title XIV of the Safe  
13 Drinking Water Act.

14 “(2) The President shall make a scientifically objective assessment of different methodologies for determining  
15 the health effects of chemical mixtures at relevant doses



1 based on reasonable exposure scenarios at National Prior-  
2 ities List facilities.

3 “(3) For purposes of such study and assessments,  
4 within 30 days after the date of the enactment of this sub-  
5 section, the President shall obtain public comments on  
6 such study and assessments. Not later than 15 months  
7 after the date of the enactment of this subsection, the  
8 President shall publish a draft of such assessments. After  
9 receiving such comments on such draft assessments, and  
10 after external peer review, but within 2 years after the  
11 date of the enactment of this subsection, the President  
12 shall complete the study and publish the assessments  
13 under this subsection. The publication of the final assess-  
14 ments shall be considered final agency action.

15 “(4) The study and assessments under this sub-  
16 section shall include a discussion, to the extent relevant,  
17 of both laboratory and epidemiological data of sufficient  
18 quality which finds, or fails to find, a significant correla-  
19 tion between health risks and a potential toxin. Where  
20 conflicts among such data appear to exist, or where animal  
21 data are used as a basis to assess human health risks,  
22 the study and assessments shall include discussion of dif-  
23 ferences in study designs, comparative physiology, routes  
24 of exposure, bioavailability, pharmacokinetics, and any  
25 other relevant and significant factor.

1       “(5) Where the study and assessment involve applica-  
2       tion of any significant assumption, inference, or model, the  
3       President shall—

4               “(A) state the weight of scientific evidence sup-  
5       porting a selection relative to other plausible alter-  
6       natives;

7               “(B) fully describe any model used in the risk  
8       assessment and make explicit the assumptions incor-  
9       porated in the model; and

10              “(C) indicate the extent to which any signifi-  
11       cant model has been validated by, or conflicts with,  
12       empirical data.

13       “(6) To the extent scientifically appropriate, the  
14       President shall include, among other estimates or health  
15       effects values, estimates of risks or health effects values,  
16       using the most plausible assumptions, given the weight of  
17       the scientific information available to the President.  
18       Where significant assumptions have substantially similar  
19       scientific support, the President shall provide a description  
20       of the range of estimates or values.”.

21       “(j) PRESENTATION OF RISK INFORMATION.—(1)  
22       The President, in carrying out responsibilities under this  
23       Act, shall ensure that the presentation of information on  
24       risk is unbiased and informative. The results of any facil-  
25       ity-specific risk evaluation shall contain an explanation

1 that clearly communicates the risks at the facility, and  
2 shall—

3 “(A) identify and explain all significant as-  
4 sumptions used in the evaluation, as well as alter-  
5 native assumptions, the policy or value judgments  
6 used in choosing the assumptions, and whether em-  
7 pirical data conflict with or validate the assump-  
8 tions;

9 “(B) present, to the extent feasible—

10 “(i) the scientifically objective distribution  
11 of exposure estimates,

12 “(ii) estimates, including estimates, of ex-  
13 posure and risk using the most plausible as-  
14 sumptions given the weight of current scientific  
15 information available to the President,

16 “(iii) groups identified through site specific  
17 risk assessment which are currently or would be  
18 highly exposed or highly susceptible (I) to con-  
19 tamination from the site based on current and  
20 reasonably anticipated uses of land, water, and  
21 other resources at or around the site, or (II) to  
22 risks arising from implementation of a remedial  
23 option, and

1                   “(iv) a statement of the nature and mag-  
2                   nitude of the scientific uncertainties associated  
3                   with such estimates;

4                   “(C) include the size of the population poten-  
5                   tially at risk from releases from the facility (based  
6                   on the current or reasonably anticipated future uses  
7                   of the land, water, or other resources), the exposure  
8                   scenario used for each estimate, and the likelihood  
9                   that such potential exposures will occur; and

10                  “(D) compare risks with estimates of greater,  
11                  lesser, and substantially equivalent risks that are fa-  
12                  miliar to and routinely encountered by the general  
13                  public as well as other risks, and, where appropriate  
14                  and meaningful, comparison of those risks with  
15                  other similar risks regulated by Federal agencies re-  
16                  sulting from comparable activities and exposure  
17                  pathways.

18 Comparisons under subparagraph (D) should consider rel-  
19 evant distinctions among risks, such as the voluntary or  
20 involuntary nature of risks.

21                  “(2) To the maximum extent practicable, documents  
22 made available to the general public which purport to de-  
23 scribe the degree of risk to human health shall, at a min-  
24 imum, provide information specified in paragraph (1) or

- 1 a meaningful reference to such information in another
- 2 document reasonably available to the public.”.